



# Family News

News and Information for Families of individuals served at Muscatatuck SDC and Madison State Hospital during the transition to community-based services.

## MEETING INFORMATION

The time and location of the next meeting of the **Southeast Regional Project Team** will be announced in a future edition.

## HANDY NUMBERS AND WEB SITES:

### MSDC/MSH Info Hotline:

1-800-903-9822

[www.IN.gov/fssa/transition](http://www.IN.gov/fssa/transition)

Maintained by FSSA to answer your questions.

### DD Waiver Ombudsman:

1-800-622-4484

Available to respond to your comments and questions.

### The Arc of Indiana:

1-800-382-9100

[www.arcind.org](http://www.arcind.org)

[www.thearcink.org](http://www.thearcink.org)

A statewide group that advocates on behalf of people with mental retardation and related disabilities and their families.

### Area Agency on Aging:

1-800-986-3505

[www.iaaa.org](http://www.iaaa.org)

AAAs provide case management, transportation, and other services to older adults and people with disabilities. Call to find the agency closest to you.

### Southern Indiana Center for Independent Living (SICIL):

1-800-845-6914

Part of Indiana's Independent Living Service system, SICIL provides people with disabilities with information and referral, advocacy and other services.

## Highlight on Community

*This is the second in a continuing series of articles that review the lives of former residents of Muscatatuck State Developmental Center. This month we look at how the transition to community-based services effects the lives of families as well as the former residents.*

Judy and Charlie Cox's son Michael, who is 26, lived in Muscatatuck from 1995 until early 2001 when he moved into the community. Michael is now living in Bloomington with the supports he needs to be successful. Of Michael's new life Mrs. Cox says "each day we see improvements." Michael's life and services have not always gone so well - in fact for a long time the going was quite difficult.

Michael, who has autism with severe self-injurious behavior and property destruction, lived at home until he was 17 when he moved into a small residential facility. Michael did well, but the facility only served people under the age of 18, so one year later Michael had to move back home. Mr. and Mrs. Cox worked hard to find Michael a new place to live, ultimately inquiring at 147 organizations in several states. They were turned down by every one.

In desperation and unable to give Michael the care he needed

at home, they turned to the State for help and Michael moved into Muscatatuck 1995. Mr. and Mrs. Cox were happy with the care Michael received at Muscatatuck, noting that the staff took extra care to get to know and understand his needs and anticipate his behavioral issues. However, when it became clear that MSDC would eventually close, the family went through the person centered planning process and Michael moved to a home in Bloomington in January of 2001. Part of the person centered planning process involved interviewing several different case managers and residential providers. The family eventually chose an organization that was willing to spend time with Michael at MSDC prior to his moving out. The family thought that this step - making sure Michael knew his providers and was comfortable with them - was essential to his eventual success in the community.

Michael moved into a home with another former MSDC resident. Both men have their own day staff and share over night staff. Michael's community support team includes a case manager, a residential provider,

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# Family Resource Center

Each month this space will highlight different disability and transition specific print and video resources available to borrow free-of-charge from the Center for Disability Information and Referral (CeDIR), part of Indiana University's Indiana Institute on Disability and Community.

The resources listed here can be obtained by calling CeDIR toll-free at 1-800-437-7924. Borrowers can keep the materials up to four weeks and the material will be mailed directly to your home. The only expense to the borrower is the cost of returning the material via US mail.

This month's featured selections:

- *Closing the Gap: Addressing the Needs of People with Developmental Disabilities* by G.A. Smith of the National Association of State Directors of Developmental Disabilities Services
- *What's Really Worth Doing and How to do it* by J.A. Snow of Inclusion Press
- *Community Living Options: Family Funded, Individually Owned, or Shared* by J. Stone of the University of Kentucky

For more information in CeDir, visit their web site at: [www.iidc.indiana.edu/~cedir](http://www.iidc.indiana.edu/~cedir)

## Assertive Community Treatment

At a recent meeting of the Regional Project Team, Joseph Stephens of Community Mental Health Center, Inc. gave a review of the types of mental health services offered by his organization. One program that is offered by his agency and other CMH's is Assertive Community Treatment (ACT). ACT is a team-based approach to delivering flexible rehabilitation services for individuals who have the most serious symptoms of severe mental illness and have the greatest difficulty with basic daily activities. ACT has been instituted as the primary system of care for persons with severe mental illness in 13 states.

People who receive ACT services typically have needs not effectively addressed by traditional mental health treatment programs. An Assertive Community Treatment team takes responsibility for most of the services needed to help keep people out of the hospital and attain a life not driven by their illness.

The team consists of 10 to 12 staff members experienced in psychiatry, social work, nursing, substance abuse treatment, and vocational rehabilitation. Instead of individual caseloads, the team is responsible for approximately 100 people.

Team members are cross-trained to the maximum extent possible, and they work with individuals in the community wherever support might be needed. There is no pre-determined set of services. The team is responsible for delivering any service or support people need to live in the community and reach the goals they have set for recovery.

Most ACT clients want to work; work is a critical part of obtaining a sense of self-worth. Therefore, the Indiana model for ACT requires a vocational specialist included on the team, or close integration between the ACT team and a supported employment program.

At its core ACT represents a network of human relationships - people reaching out to help other people. ACT clients have expressed that the most helpful aspect of this form of treatment is having someone to talk to, to rely on, and to help solve problems. Home and community visits allow the team to interact with clients in their environment. This core concept of ACT enables team members to establish caring, trusting relationships with clients.

# INTERNET ACCESS RESOURCE CENTER

Many articles in this newsletter direct readers to the Internet sites of various organizations. We hope the sites listed will be helpful to readers as they gather information about the transition and the resources available in the community. Continuing this month and in future editions, we will list locations in southeastern Indiana where the Internet can be accessed for free.

## DECATUR COUNTY

### **Greensburg Public Library**

1110 East Main Street  
Greensburg, IN 47240  
812-663-2826

9 computers, 4 hour limit, 1 hour if people are waiting. Must sign policy statement.

### **Jeffersonville Township Public Library**

#### *Clarksville Branch*

1312 Eastern Boulevard  
Clarksville, Indiana 812-285-5640  
3 computers for adult use (1 hour limit per day), 1 more for 15-minute e-mail access.  
Users must present library card or photo ID.

### **Westport Branch Library**

205 West Main Street  
Westport, IN 47283  
812-591-2330  
2 computer terminals, 1-hour time limit.  
Must sign policy statement and have photo ID if not a Decatur County library cardholder.

## BARTHOLOMEW COUNTY

### **Bartholomew County Public Library**

536 Fifth Street  
Columbus, IN 47201  
(812) 379-1255  
10 terminals; 1-hour limit if people waiting;  
1 for Spanish language;  
individuals must be assigned to a terminal by the Reference Desk.

### **Bartholomew County Public Library**

#### *Hope Branch*

635 Harrison Street  
(east side of the town square)  
Hope, IN 47246  
812-546-5310  
3 computers; must read policy statement;  
1/2-hour time limit if people waiting.

## HARRISON COUNTY

### **Harrison County Public Library**

105 North Capitol Avenue  
Corydon, IN 47112  
812-738-4110  
8 terminals, 1-hour limit if people waiting.  
Need library card, must sign policy statement.

## WASHINGTON COUNTY

### **Salem-Washington Township Public Library**

1318 South Jackson Street  
Salem, IN 47167  
812-883-5600  
8 terminals; 2 hour limit per day, 1/2-hour if people waiting. Must sign policy statement.

## JACKSON COUNTY

### **Brownstown Public Library**

120 East Spring  
Brownstown, IN 47220  
812-358-2853  
5 computer terminals; must be a library cardholder; must sign policy statement.

### **Seymour Library**

303 West 2nd Street  
Seymour, IN 47274  
812-522-3412  
11 terminals; 1 ADA computer; 1-hour time limit if people waiting.

### **Crothersville Library**

120 West Main Street  
Crothersville, IN 47229  
812-793-2927  
4 terminals. Must have library card or driver's license. 1 hour limit if people are waiting.

### **Medora Library**

27 West Main Street  
Medora, IN 47260  
812-966-2278  
3 terminals; must be a library cardholder;  
1-hour time limit if people waiting.

## Family and Employee News Now Available On-Line

Both the *Family News* and *Employee News* newsletters will now be posted on-line each month. FSSA's Muscatatuck/Madison Transition Process web site has added the newsletters as a feature.

The web page can be viewed at:

[www.IN.gov/fssa/transition](http://www.IN.gov/fssa/transition)

## Contact Us!

FSSA maintains a web site, a toll-free phone number, and this newsletter to keep MSDC and MSH families fully informed.

Anyone who would like to receive this newsletter can call the number listed, leave their address, and be added to our mailing list.

The web site features questions discussed at family and employee meetings, the final report from the Governor's Council on State Operated Care Facilities, updates on the *Olmstead* process, articles, and more.

You can visit the web site at:

[www.IN.gov/fssa/transition](http://www.IN.gov/fssa/transition)

If you have questions, comments or concerns, or want to request copies of items on the web site, write to:

**Secretary, FSSA**  
**402 W. Washington St.,**  
**Room W461**  
**Indianapolis, IN 46207-7088**  
**Attn: MSDC/MSH**

or email:

[OfficeOfTheSecretary@fssa.state.in.us](mailto:OfficeOfTheSecretary@fssa.state.in.us)

or call toll-free, 24 hours a day:

**1-800-903-9822**

You can also call this number if you have concerns about the services that your loved one receives after leaving MSDC or MSH.

## A Quick Look at the Past Year

*Robin Stearns, Executive Assistant to the superintendent of Muscatatuck, prepared the following article that reviews some of the changes the facility has seen in the past year.*

On April 19, 2001, it was announced that Muscatatuck State Developmental Center in Butlerville would close. Since the announcement and as residents have begun to move out, the facility has seen many changes. Below you will find a few of the changes we have been tracking:

- A total of 16 buildings or 170,335 square footage has been closed. Three (3) of these buildings were residential while the other buildings were used for storage, offices, employee

daycare services, programming and staff housing.

- There were 279 individuals living at Muscatatuck at the time of the announcement. Of those, sixty-one (61) people are now living away from MSDC.
  - 29 in Supported Living
  - 27 to Group Homes
  - 3 to other State Operated Facilities
  - 2 Alternative Families for Adults
- The current census at MSDC as of 3-26-02 is 208.

On April 19, 2001, MSDC employed 985 full time state employees. As of 3-25-02 there are 866 state employees.

## Highlight on Community

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a behavioral team, and several doctors. Michael does not attend any kind of day program, instead his day is filled with the same sort of daily activities as everyone else - going to the grocery store, exercise at the YMCA, fixing meals, cleaning, and doing laundry. Completing these tasks can be especially difficult for Michael because his behavioral issues - which include taking his clothes off in public places and hitting his head against the wall - slow down the process considerably. However, Mr. and Mrs. Cox are very happy with Michael's staff, who patiently help Michael to stay on task, overcome his behavioral issues, and finish what he started.

On whole, the Cox family is pleased with Michael's new life in the community. They report that Michael has had good peri-

ods and more challenging periods. The Coxs have found that the most important element in making the transition to community life is having the right supports in place before moving into the community. "With the right supports anyone should be able to make it in their own home" Mrs. Cox said at the February Regional Project Team meeting adding "there will be ups and downs but there were ups and downs at Muscatatuck. We are all afraid of change, but change occurs on a daily basis." One positive change Mr. and Mrs. Cox were happy about was that Michael was able to spend Christmas 2001 at home for the first time in six years.